PTO/SB/22 (07-09)

Approved for use through 07/31/2012. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

	OR EXTENSION OF TIME LINDER 2		Docket Number (Option						
PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4816).) Application Number 10/789,433			45738-296417 Filed February 27, 2004						
					For COMF PROTEINS	POSITIONS AND METHODS FOR THE S	SPECIFIC DETEC	TION OF MAMMALIAN	MUSCLE
					Art Unit 164	5		Examiner JaNa A. I	lines
This is a request application.	under the provisions of 37 CFR 1.136(a) to ex	xtend the period for	filing a reply in the above id-	entified					
The requested e	xtension and fee are as follows (check time pe	eriod desired and en	ter the appropriate fee below	w):					
		<u>Fee</u>	Small Entity Fee						
	One month (37 CFR 1.17(a)(1))	\$130	\$65	\$					
	Two months (37 CFR 1.17(a)(2))	\$490	\$245	\$					
	Three months (37 CFR 1.17(a)(3))	\$1110	\$555	\$ <u>555</u>					
	Four months (37 CFR 1.17(a)(4))	\$1730	\$865	\$					
	Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	\$					
A check in	claims small entity status. See 37 CFR on the amount of the fee is enclosed. by credit card.	1.27.							
☐ The Direc	tor has already been authorized to charg	e fees in this appl	ication to a Deposit Acco	unt.					
☐ The Direc	tor is hereby authorized to charge any fe	es which may be r	equired, or credit any ov	erpayment, to					
WARNING:	ccount Number <u>11-0855</u> . Information on this form may become pub Provide credit card information and author			cluded on					
I am the	applicant/inventor.								
I am the	□ applicant/inventor. □ assignee of record of the entire in Statement under 37 CFR 3.73								
I am the	assignee of record of the entire in	(b) is enclosed. (I	Form PTO/SB/96).						
I am the	assignee of record of the entire in Statement under 37 CFR 3.73	(b) is enclosed. (l stration Number <u>5</u>	Form PTO/SB/96).						
I am the	assignee of record of the entire in Statement under 37 CFR 3.73 attorney or agent of record. Regi	(b) is enclosed. (l stration Number <u>5</u> I.34.	Form PTO/SB/96).						
	□ assignee of record of the entire in Statement under 37 CFR 3.73 □ attorney or agent of record. Region □ attorney or agent under 37 CFR 1	(b) is enclosed. (l stration Number <u>5</u> I.34.	Form PTO/SB/96).	010					
/Ka	assignee of record of the entire in Statement under 37 CFR 3.73 attorney or agent of record. Regi attorney or agent under 37 CFR 3.73 Registration number if acting under 37 sthryn H. Wade/ Signature	(b) is enclosed. (l stration Number <u>5</u> I.34.	Form PTO/SB/96). 44.682 September 9, 2 Date	010					
/Ka	□ assignee of record of the entire in Statement under 37 CFR 3.73 ☑ attorney or agent of record. Region attorney or agent under 37 CFR ** Registration number if acting under 37 atthryn H. Wade/	(b) is enclosed. (l stration Number <u>5</u> I.34.	Form PTO/SB/96). <u>4.682</u> September 9, 2	010					

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or rotain a benefit by the public which is to fee (and by the USFT 0.10 process) an application, Confidentialistip geoverned by \$51.05.C. 12 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USFT.0. Time will year depending upon the introduction and Application form to the USFT.0. Time will year depending upon the introduction and the process of the pr

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.